



RESOURCE RECOVERY CORP.

A CHEMPRO COMPANY

5501 AIRPORT WAY SO.
OFFICE (206) 767-0355SEATTLE, WASH. 98108
DISPATCH (206) 824-1878

BILL OF LADING

313756

WA 2917

9/20/1988

ORIGIN Seattle Washington (Pier 91) DATE 9/20 19 88SHIPPER Chemical Processors IncorporatedCONSIGNEE Chemical Processors IncorporatedDESTINATION Seattle Washington (Briarcliff)

SHIPPERS NO.

ORDER NO.

00827

H2633

IN THE ABSENCE OF A BILL OF LADING SUPPLIED BY THE SHIPPER, THIS TRUCK LOADING ORDER
WILL BECOME A LEGAL BILL OF LADING. TRANSPORTATION SUBJECT TO PUC REGULATIONS.

FOR OFFICE USE ONLY

QUANTITY	DOT PROPER SHIPPING NAME	HAZARD CLASS	HAZ. MATERIAL I.D. NUMBER	WEIGHT	RATE	FREIGHT
20m	MATERIAL NOT REGULATED BY DOT.	—	—			
130m	HAZARDOUS WASTE Liquid Nails	ORM-E	NA 9189			

FILE COPY

GROSS _____ SHIPPER Jeff Nelson

TARE _____ CONSIGNEE _____

NET _____ TRANSPORTED BY Jim RousePLEASE PAY
THIS AMOUNT ➔PUC REGULATIONS REQUIRE PAYMENT OF THIS BILL IN SEVEN DAYS.
ORIGINAL FREIGHT BILL

USEPA RCRA



3012744

CHEMICAL PROCESSORS, INC./RESOURCE RECOVERY CORP.

06827

5501 Airport Way So. • Seattle, WA 98108
Chempro 767-0350 • Resource Recovery 767-0355Please print or type
(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address		Chemical Processors Inc. Pier #9/ 2001 W. Gardfield Seattle Wa. 98119		A. State Manifest Document Number		
4. Generator's Phone (206) 284-2450				B. State Generator's ID		
5. Transporter 1 Company Name		6. US EPA ID Number		C. State Transporter's ID		
Resource Recovery		WAD 061672812		D. Transporter's Phone 206-223-0500		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		
				F. Transporter's Phone		
9. Designated Facility Name and Site Address		10. US EPA ID Number		G. State Facility's ID		
<input checked="" type="checkbox"/> Chempro 734 So. Lucile St. Seattle, WA (206) 767-0350		WAD 000812909				
<input type="checkbox"/> Chempro Pier 91 Seattle, WA (206) 284-2450		WAD 000812917				
<input type="checkbox"/> Chempro 1701 Alexander Tacoma, WA (206) 627-7568		WAD 020257945				
<input type="checkbox"/> Other:				H. Facility's Phone		
				206 762-3362		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
				No.	Type	Waste No.
a.	Hazardous Waste Liquid, N.O.S., ORM-E NA 9159			7	DM	385 G F001 F002
b.	Hazardous Waste Liquid, N.O.S., ORM-E NA 9159			5	DM	275 G W002
c.	Hazardous Waste Liquid, N.O.S., ORM-E NA 9159			1	DM	55 G F002
d.	Non-Hazardous Solids (Material not regulated)			2	DM	TTD 1/2 5th NH
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name				Signature		Month Day Year
Jeff Nelson				Jeff Nelson		19 10 88
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature		Month Day Year
Printed/Typed Name				Signature		Month Day Year
Jim Reese				Jim Reese		19 10 88
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature		Month Day Year
Printed/Typed Name				Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name				Signature		Month Day Year